

**FEC
FORM 1****STATEMENT OF
ORGANIZATION**

(See instructions)

Office use only

1. NAME OF
COMMITTEE (in full)☐(Check if name
is changed)Example: If typing, type
over the lines

12FE4M5

Haleys PAC

ADDRESS (number and street)

P.O. Box 1186

☐(Check if address
is changed)

Jackson

MS

39215

CITY ▲

STATE ▲

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE

M M
0 8/ D D
1 9/ Y Y Y Y
2 0 0 4

3. FEC IDENTIFICATION NUMBER

C C00406314

4. IS THIS STATEMENT

☐

NEW (N)

OR

☒

AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer

Arnie Hederman

Signature of Treasurer

Electronically Filed by Arnie Hederman

Date

M M
0 6/ D D
2 6/ Y Y Y Y
2 0 0 6

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. § 437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office
Use
OnlyFor further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-694-1100**FEC FORM 1**
(Revised 02/2003)

Cooperative

Write or Type Committee Name

Haleys PAC

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name **Mimi Taylor**

Mailing Address **408 Timber Ridge Way**

Brandon **MS** **39047** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Custodian of Records Telephone number - -

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer **Arnie Hederman**

Mailing Address **2240 Bellingrath Rd**

Jackson **MS** **39211** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Treasurer Telephone number - -

Full Name of Designated Agent **Austin Barbour**

Mailing Address **20 Woodlawn Dr**

Yazoo City **MS** **39194** -

Title or Position ▼ **CITY ▲** **STATE ▲** **ZIP CODE ▲**

Director Telephone number - -

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	BankPlus		
Mailing Address	385A Highland Colony Pkwy		
	Suite 110		
	Ridgeland	MS	39157 -
	CITY ▲	STATE ▲	ZIP CODE ▲